Public Good Projects
Colorado eHealth Commission

Dr. Joe Smyser, PhD MSPH

December, 2019

PGP | THE PUBLIC GOOD PROJECTS

Who we are

The Public Good Projects (PGP) is a public health nonprofit that specializes in using the tools and techniques of communication for large-scale public health programs.

PGP routinely creates disease surveillance systems using publicly available media data. These systems often power behavior change campaigns.

Systems include:
- Sugar-sweetened beverages
- Tobacco products (including e-cigs)
- Mental health
- Low birth weight
- Opioids
- Alcohol
- School wellness
- Social isolation
- **Vaccines**

Project VCTR
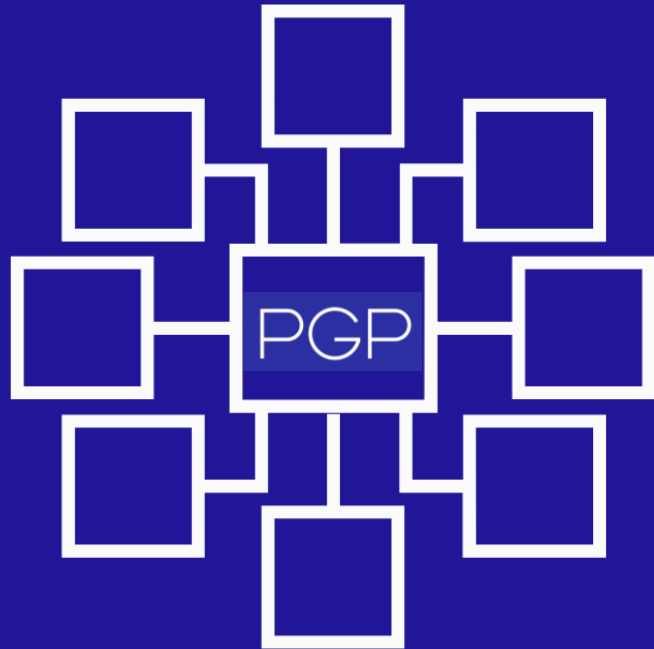## **V**accine **C**ommunication **T**racking & **R**esponse

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Methodology: Data Queries

Methodology: Results

Keyword Query

Standalone Words

#antifluvaccine	#vaccinating	antivax
#antivacc	#vaccination	antivaxxer
#antivaccination	#vaccinations	antivaxxers
#antivaccine	#vaccine	flu shot
#antivaccines	#vaccinechoice	immunization
#antivax	#vaccinedamage	immunizations
#antivaxer	#vaccinedeath	pre-vax
#antivaxers	#vaccinefailure	pro-immunization
#antivaxmovement	#vaccinehesitant	pro-immunizations
#antivaxxer	#vaccineinjury	pro-vaccination
#antivaxxers	#vaccineprotection	pro-vaccine
#flushot	#vaccines	pro-vaccines
#fuckvaccines	#VaccinesCauseAIDs	pro-vax
#getvaccinated	#VaccinesCauseAutism	pro-vaxer
#GlobalVaccineSummit	#VaccinesCauseRegressiveAutism	pro-vaxers
#immunization	#vaccinescausesids	pro-vaxx
#immunizations	#vaccinesdangers	pro-vaxxer
#learntherisk	#vaccineskill	pro-vaxxers
#NoForcedVaccination	#vaccineskillandmaim	provaccine
#prevax	#Vaccinesuncovered	provaccines
#proimmunization	#vaccineswork	unvaccinated
#proimmunizations	#vaccinetruth	unvax
#provaccination	#vaccn	unvaxxed
#provaccine	#vaccschedule	vacc damage
#provaccines	#vacine	vacc schedule
#provax	#vacines	vacc'd
#provaxer	#vaxer	vacc'n
#provaxers	#vaxism	vaccinate
#provaxx	#vaxx	vaccinater
#provaxxer	#vaxxed	vaccinates
#provaxxers	#VaXXedII	vaccinating
#StopforcedVaccination	#vaxxer	vaccination
#StopMandatoryVaccina	anti-flu-vaccine	vaccinations
#unvaccinated	anti-vacc	vaccine
#unvax	anti-vaccination	vaccine hesitant
#unvaxxed	anti-vaccine	vaccine protection
#vaccd	anti-vaccines	vaccine-hesitant
#vaccdamage	anti-vax	vaccines
#vaccinate	anti-vaxer	vacine
#vaccinater	anti-vaxers	vacines
#vaccinates	antivaccination	vaxer
#vaccinateus	antivaccine	vaxx

Co-Occurring (vax, vacc, vacci, #vax, #vacc, #vacci, #vax) +

#acuteflaccidmyelitis	#Malaria	#whoopingcough	HIV	swine flu	#Paralysis	#choice	poisons
#Adenovirus	#measel	#yellowfeaver	HIV/AIDS	swineflu	#paralyze	#cdcwhistleblow	pro health
#afm	#measle	#yellowfever	HPV	TB	#paralyzed	#notgoingaway	pro-health
#AIDS	#measles	#zika	influenza	Td	#paralyzes	#provenright	pro-health
#Anthrax	#measlesmumpsrubella	acute flaccid myelitis	IPV	TDaP	#paranoid	#YourBestShot	promoter
#anti-flu	#meesel	Adenovirus	lyme	tetanus	#poison	adverse	promoters
#BCG	#meesels	afm	Malaria	tuberculosis	#poisoning	afraid	rejecter
#Bird flu	#meningitis	AIDS	measel	typhoid	#poisonous	autism	rejecters
#cancer	#meningococcal	Anthrax	measle	varicella	#poisons	autistic	scare
#chickenpox	#MMR	anti-flu	measles	whooping cough	#prohealth	booster	scared
#cholera	#MMR2	BCG	measles-mumps-ru	yellow feaver	#promoter	conspiracy	scaremongering
#Diphtheria	#MMRII	Bird flu	meesel	yellow fever	#promoters	contagious	scares
#Diptheria	#MMRtwo	cancer	meesels	zika	#rejecter	coverage	scary
#DPT	#MMRV	chicken pox	meningitis	#adverse	#rejecters	delayed	seizure
#DTap	#mumps	chickenpox	meningococcal	#afraid	#scare	delayer	seizures
#dtp	#mumps	cholera	MMR	#autism	#scared	delayers	side effects
#DTPa	#NOS	Diphtheria	MMR 2	#autistic	#scaremongering	epidemic	side-effects
#DTwP	#OPV	Diptheria	MMR II	#booster	#scares	fear	skeptic
#Encephalitis	#Papillomavirus	DPT	MMR two	#conspiracy	#scary	fearmongering	skeptical
#flu	#Pentavalent	DTap	MMRV	#contagious	#seizure	fever	toxic
#fluenza	#pertussis	DTP	mumps	#coverage	#seizures	Globulin	toxin
#Flushot	#Pneumococcal	dtp	mumps	#delayed	#sideeffects	herd	trustworthy
#flustrain	#polio	DTPa	NOS	#delayer	#skeptic	hesitancy	uncertain
#flustrains	#poliovirus	DTwP	OPV	#delayers	#skeptical	hestitant	unconclusive
#foodasmedicine	#pox	Encephalitis	Papillomavirus	#epidemic	#toxic	ignorance	unsafe
#gardasil	#rabies	flu	Pentavalent	#fear	#toxin	ignorant	untrustworthy
#guardasil	#Rotavirus	flu strain	pertussis	#fearmongering	#trustworthy	illness	virus
#H1N1	#rubela	flu strains	Pneumococcal	#fever	#uncertain	illnesses	reaction
#H7n9	#rubella	fluenza	polio	#Globulin	#unconclusive	needle	allergin
#HAV	#shingle	Flushot	poliovirus	#herd	#unsafe	needles	allergy
#HBV	#Shingles	food as medicine	pox	#hesitancy	#untrustworthy	neurological dan	pro-informed consent
#hepatitis	#SIDS	gardasil	rabies	#hestitant	#virus	outbreak	informed consent
#HEV	#smallpox	guardasil	Rabies	#ignorance	#reaction	outbreaks	pro kids
#Hexavalent	#suddeninfantdeathsyndr	H1N1	Rotavirus	#ignorant	#allergin	pandemic	pro-kids
#Hib	#swineflu	human papplioma	rubela	#illness	#allergy	Paralysis	pro-medical freedom
#HIV	#TB	H7n9	rubella	#illnesses	#proinformedcon	paralyze	medical freedom
#HIV/AIDS	#Td	HAV	shingle	#needle	#informedconsen	paralyzed	risk aware
#HPV	#TDaP	HBV	Shingles	#needles	#prokids	paralyzes	mandate
#humanpappiloma	#tetanus	hepatitis	SIDS	#neurologicaldam	#promedicalfreec	paranoid	choice
#influenza	#tuberculosis	HEV	small pox	#outbreak	#medicalfreedom	poison	
#IPV	#typhoid	Hexavalent	smallpox	#outbreaks	#riskaware	poisoning	
#lyme	#varicella	Hib	sudden infant death	#pandemic	#mandate	poisonous	

Top Authors

Since June 1st, 4.6 million mentions

https://twitter.com/viraburnayeva
Account now suspended for suspicious activity, but she has opened up a new account under "LotusOak2" below

https://twitter.com/patriot7842
#MAGA us, Patriot, #Iwalkedaway, support our troopsus

https://twitter.com/mission2heal
TXmom2#vaxxed injured child/Diagnosed;StaticEncephalopathyManifstdByAutistic-LikeBehaviors.VaxCanCauseAutism! #Trump #DrainTheSwamp #PharmaOwnsCongress #MAGA

https://twitter.com/aspiesmom
Fighting for disabled adult son's health/human rights like a Mom does ;^) I was pregnant downwind of coal-fired paper mill. My son was born w/Asperger's.#VAXXED

https://twitter.com/lotusoak2
☕ God, please give me the grace to accept the things that I cannot change. And grant unto me the power to change the things that I cannot accept. ☕

https://twitter.com/minnreb
"There are three kinds of lies: lies, damned lies, and statistics."Disclaimer: I don't always post only things I agree with- sometimes it's just interesting

https://twitter.com/kateri60270481
Mom. Naturalist. Activist. Holistic health care. Never mandated medicine. Libertarian. Kratom. Cannabis. All of my freedoms all of the time.

https://twitter.com/mazymmary
Ex-vaxxer, 👀Q!!!, WWG1WGA, truther for The Great Awakening. Follower of the Trinity, Roman Catholic conservative KAG

https://twitter.com/robschneider
"REAL ROB" SEASON 2, A NETFLIX ORIGINAL SERIES IS STREAMING WORLDWIDE NOW!!

https://twitter.com/highwiretalk
High above the circus of mainstream media spin, death-defying talk without the safety net of corporate influence... this is The HighWire with Del Bigtree

Top Author's Themes

Theme	Proportion
Policies & Politics	73.8%
Negative Health Impacts Attributed to Vaccination	57.5%
Disease Prevalence	52.3%
Pharmaceutical Industry	48.3%
School	39.8%
Research & Clinical Trials	38.8%
Vaccine Ingredients	37.1%
Family	23.5%
Pro-Vaccine Education	20.8%
Religion	19.2%
Technology Platforms	15.6%
Natural Alternatives	4.2%

Potential Messaging Strategies

DON'T DO

Center for Strategic Counterterrorism Communications (CSCC)
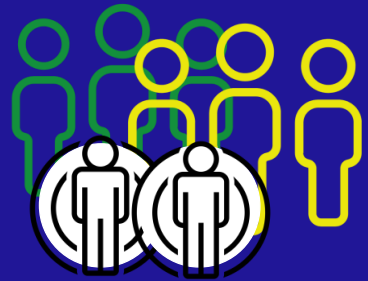

DO

Global Engagement Center
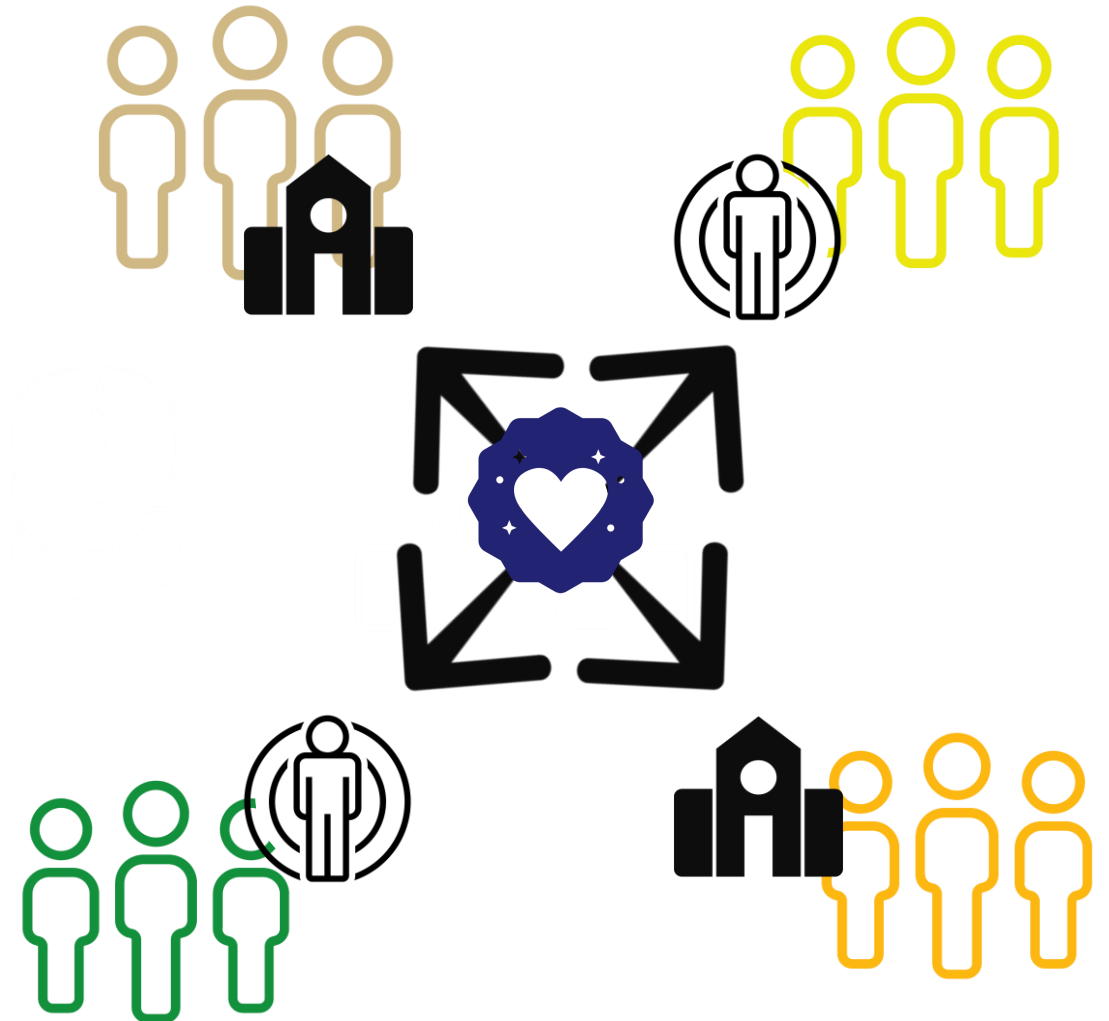
DO, cont'd

Religious leaders

Almost no religions prohibit vaccination

Professional associations

Thought leaders

Chiropractic, Libertarian, etc

- -

Social media influencer

It's not them, it's who follows them

Immunocompromised people

Who are we actually protecting?

DO, cont'd

Gov't

- Recognize your sphere of influence.
  - *It's smaller than it used to be.*
- Defer to health authorities
  - *"Our country's best and brightest never stop studying vaccines and all agree…"*
- Be consistent
- Know the science
  - *"Very" vs. "97%"*
- Monitor the situation
  - *VCT if not VCTR*
- Build a coalition
  - Based on at-risk populations

Allies

- Allies should actually help
  - Who do they reach?
  - What can they say/do?
    - *"Swarm, swarm!"*

CONSIDERATIONS FOR MESSAGE DEVELOPMENT[1]

AMPLIFYING PRO-VACCINE VOICES | MESSAGING FOR AUDIENCE-TARGETED ACTIVATION

Bio Biotechnology Innovation Organization

WHAT SHOULD MESSAGING ADDRESS AND EXCLUDE IN THE U.S.?

PROMOTE

- Emphasize arguments supporting strong immunization standards and requirements.
- Emphasize the third-party validation of vaccines' safety and role in reducing disease from the medical community at large.
- Emphasize the risk people personally would pose to themselves and their communities, specifically vulnerable populations, by going unvaccinated.
- Emphasize the increasing risk of vaccine-preventable disease outbreaks.

PROTECT

Dispel anti-vaccine arguments that are starting to gain ground, including:

- Profitability of vaccines for pharmaceutical companies
- Mandatory vaccinations take away parental choice
- Mandatory vaccinations violate individual liberties

Use facts and statistics from credible sources to support these claims and stances.
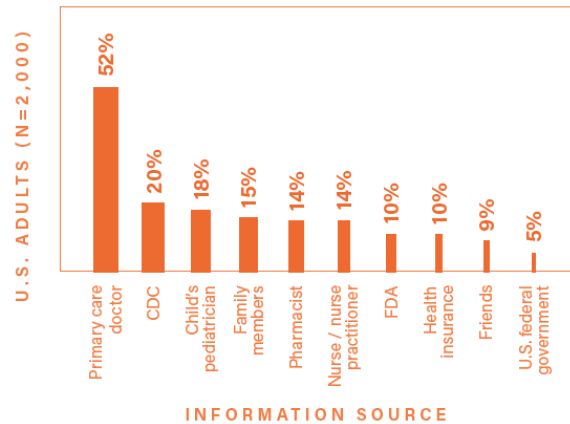
AVOID

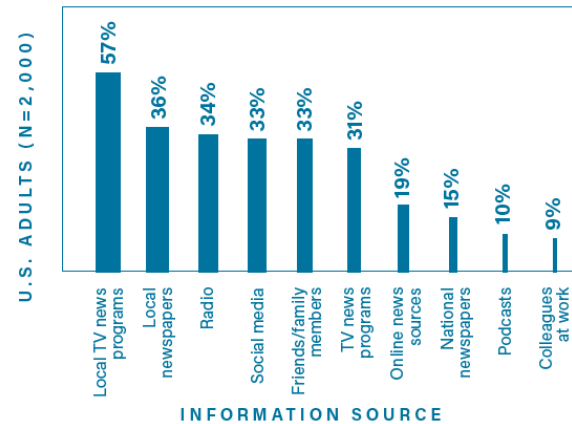Speaking in absolutes without data and facts to back it up.

FOR EXAMPLE:
Instead of simply saying "vaccines are one of the most safe and effective preventive tools," be sure to add a stat i.e. "two doses of the MMR vaccine are 97% effective at preventing measles."
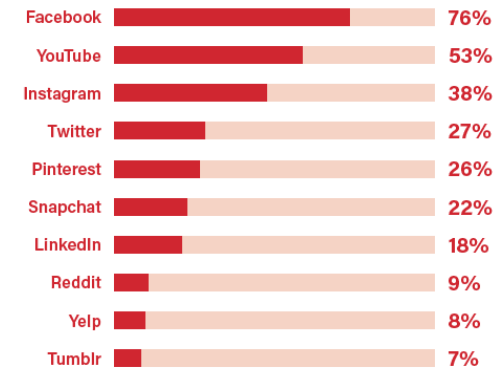

WHERE DO AMERICANS GO FOR INFORMATION ABOUT VACCINES?

U.S. ADULTS (N=2,000)

Information Source	%
Primary care doctor	52%
CDC	20%
Child's pediatrician	18%
Family members	15%
Pharmacist	14%
Nurse / nurse practitioner	14%
FDA	10%
Health insurance	10%
Friends	9%
U.S. federal government	5%

INFORMATION SOURCE

WHERE DO AMERICANS GO FOR NEWS AND INFO IN GENERAL?

U.S. ADULTS (N=2,000)

Information Source	%
Local TV news programs	57%
Local newspapers	36%
Radio	34%
Social media	33%
Friends/family members	33%
TV news programs	31%
Online news sources	19%
National newspapers	15%
Podcasts	10%
Colleagues at work	9%

INFORMATION SOURCE

WHICH SOCIAL MEDIA PLATFORMS DO AMERICANS USE? (N=2,000)

Platform	%
Facebook	76%
YouTube	53%
Instagram	38%
Twitter	27%
Pinterest	26%
Snapchat	22%
LinkedIn	18%
Reddit	9%
Yelp	8%
Tumblr	7%

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[1] *Edelman Intelligence Survey*, November 2018.

Thank You!

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PGP | THE PUBLIC GOOD PROJECTS

State-Based

Anti-Stigma Opioid
Behavior Change Campaign

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PGP

A public health nonprofit.

PGP designs, manages, and evaluates large-scale behavior change programs.

PGP has been on the front lines of the opioid crisis response for three years.

Opioid crisis work to date:
U.S. Centers for Disease Control and Prevention
U.S. Substance Abuse and Mental Health Services Administration
U.S. National Academies of Sciences
U.S. Drug Enforcement Agency
Milken Institute
WPP, world's largest communication company
Facebook, Google, Twitter, Tumblr

Board of current and former executives from the public and private sectors.

Staff is 50% public health, 50% communications.

PGP has ongoing partnerships and programs with several of the United States' largest media and technology companies, as well as federal and state health agencies.

PGP leverages these relationships for its opioid crisis programs.

Increasing Knowledge and Reducing Stigma

The most effective strategies:

1. Strengthen the capacity of stakeholders (organizations and individuals) already responding to the crisis;
2. Integrate with a state's existing plan;
3. Educate the public using channels and messengers that meet them where they are;
4. Evaluate the entire effort as a public health intervention, not a media campaign.
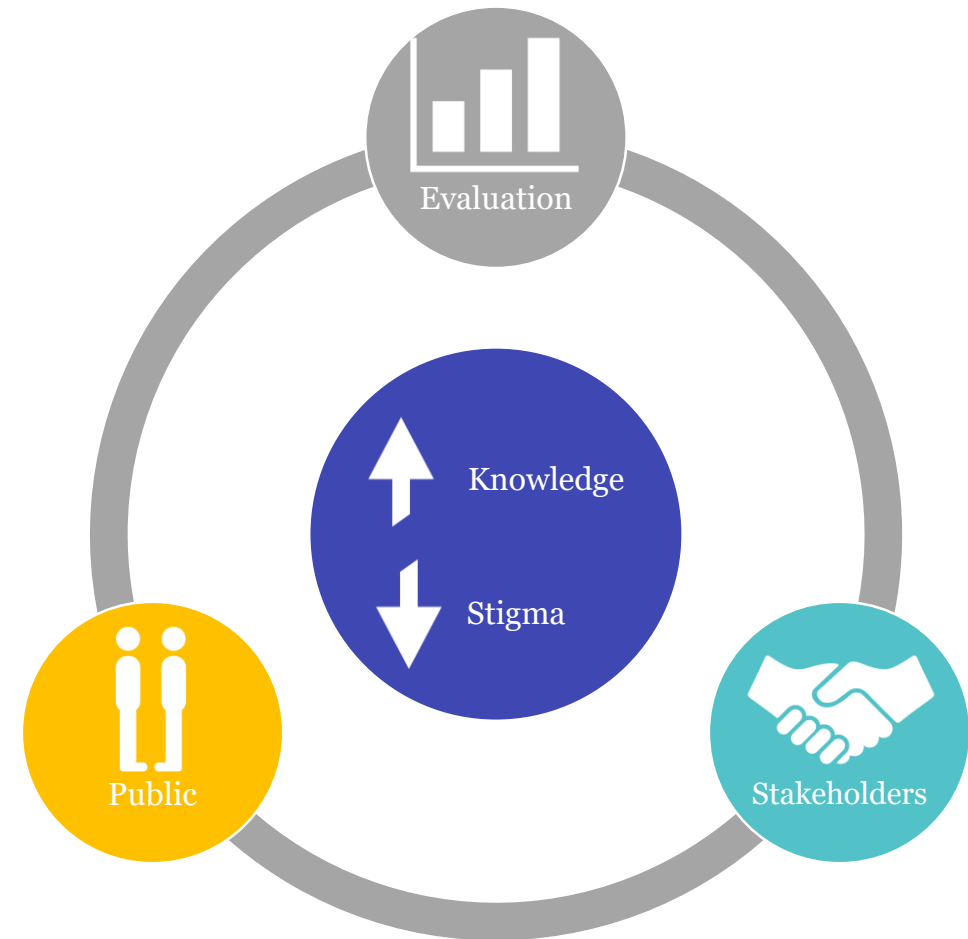
PGP behavior change campaigns:

1. Are Contact-Based: members of the public are exposed to individuals who have personal experience with the crisis. These individuals share educational information through personal stories, all vetted by the campaign.

2. Use paid media carefully. Digital channels can reach priority audiences most efficiently, aided by donated media and the reach of community-based organizations.

3. Use social media "influencers." Influencers are individuals who are viewed as authentic and credible by each audience segment.

———————
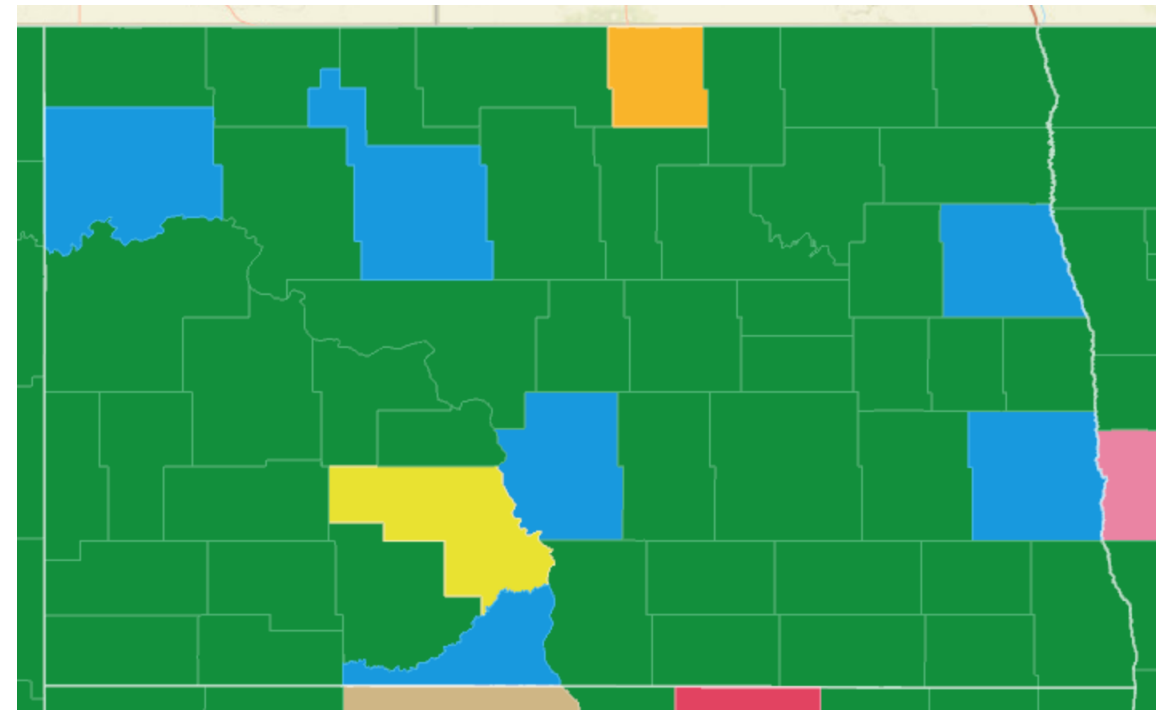
This is a map of audience segments in North Dakota, denoted by color.

These segments represent groups of individuals with shared social norms and media habits.

These social norms and media habits determine the influencers most likely to be viewed as authentic and credible messengers.

There can be some overlap in shared values across segments, but generally each segment is reached by different influencers and community orgs.

Local knowledge of communities and priority populations take precedent.

Stakeholders

Strengthening Organizations

1. Community-based and state-wide organizations already committing resources are identified and vetted;
2. These organizations are given a Needs Assessment, identifying needs for skills training and communication resources;
3. Organizations then receive monthly technical assistance webinars and media (videos, images, etc) tailored to their needs;
4. Media is disseminated by each organization on their own channels, under their own brand, reaching their own constituents.

*In a similar program, PGP supports 55 community-based and state organizations with trainings and media, tailored to their
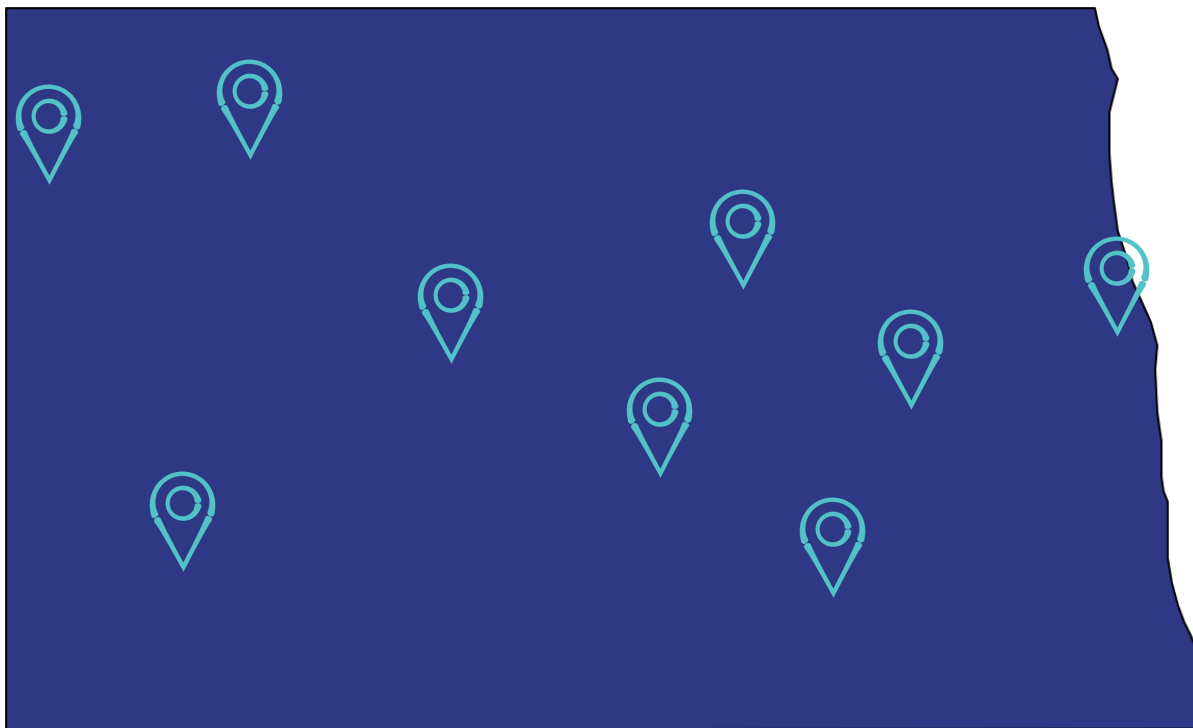
In each state, PGP identifies...

Individuals referencing personal

experience with opioids in public media. These are individuals who are already publicly sharing about the impact of addiction on themselves and their loved ones, on social media.

In PGP's experience, every state can produce at least **100 individuals** sharing their personal stories, per year, across channels (right).

Influencers ready to start sharing vetted

messages. These are individuals who are active on a social media site, and who many in the state follow.

Every state has **hundreds of influencers** able to promote the personal stories of the campaign, on their own social media accounts, per year.

CHANNELS

Campaign → Community Organizations → Their constituents

Campaign → Influencers → Priority Segments of the Public

Campaign → Campaign-Owned State-Based Channels → The General Public and Priority Segments

Careful use of paid media promotes messages to particular in-state audiences.

How Does PGP Identify Individuals?

Individuals with a personal experience with opioids shared in public media

- One of PGP's core capabilities is public health monitoring, or the monitoring of all publicly available media (television, radio, newspapers and magazines, social media, websites, etc.). This monitoring identifies individuals in a state that are publicly speaking about personal experiences with opioids.

Most states can generate many more than **100 individuals** sharing their personal stories, per year. Generally, 1 in 10 people agree to share.

**Influencers** ready to start sharing vetted messages

- PGP regularly employs locally relevant influencers in its public health campaigns. These individuals are identified using software that quantifies "influence" and shows followers.

Public

Stakeholders

How Does PGP Recruit Individuals?

1. PGP staff identify individuals publicly sharing personal experiences, and influencers who resonate with audiences.
2. PGP's outreach team vets individuals and influencers. Those who pass vetting are contacted and asked to join the campaign.
3. Individuals share their story with the campaign, allowing the campaign to promote it, while influencers agree to share pre-approved messages with their audience, in their own voice.

Stakeholders, Individuals, Influencers, & Media
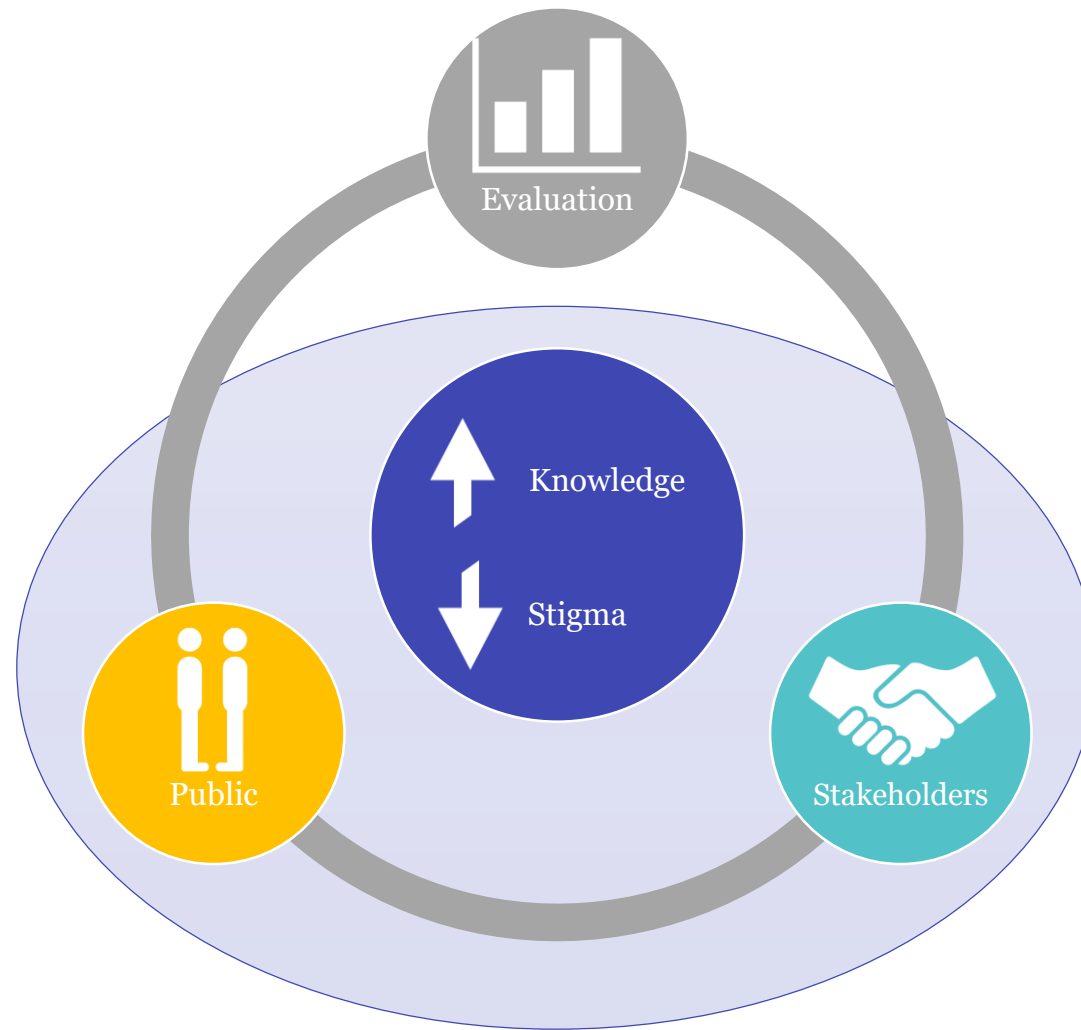
Working Together and Evaluated Together

the public good projects

Evaluation

A Public Health Intervention

1. There are standardized measures that evaluate whether Knowledge, Attitudes, and Behavior have changed, including reductions in stigma. These measures are collected by survey.
2. Prior to the campaign, PGP would establish a Baseline by surveying a representative sample of the state's population.
3. After the campaign commences, PGP would administer the same survey every six months, evaluating statistically significant shifts in Knowledge, Attitudes, Behavior.
4. This data would be shared with stakeholders, and peer-reviewed.

Calls-To-Action (CTA's)

Campaign CTA's are directly linked to evaluation measures and state priorities.

Additionally, CTA's can direct to national/local resources and events. Resources can take advantage of content created by Shatterproof that can be tailored for individual states.

e.g. "Share your story with us, and in your community. Silence creates stigma. Conversations end it."

e.g. "Sign the pledge to eliminate stigmatizing language today."

e.g. "Want to get trained to save a life? Find free or low-cost trainings here."

1. Every PGP campaign is evaluated as a public health intervention, with data publicly available and results published.
2. Results from marketing metrics (Reach, Frequency, Engagement, etc.) are evaluated alongside results from public health measures (often surveys) to optimize the campaign.
3. PGP commits to several conference abstracts and presentations each year, to build the public sector's evidence base, promote knowledge sharing, and build partnerships.

Case Study: State-Based Mental Health Stigma Campaign

Background

In January 2018 Kaiser Permanente contracted PGP to reduce the public stigma of mental health. The behavior change campaign would take place in eight states and the District of Columbia (Hawaii, California, Oregon, Washington, Colorado, Georgia, Maryland, Virginia, D.C.).

PGP performed a review of all previous campaigns and literature having to do with public stigma, and interviewed numerous subject matter experts. This resulted in the behavior change strategy outlined in this presentation.

PGP had employed public health media monitoring, local social media influencers, and support of community based organizations in its prior work, but never for a campaign to reduce public stigma.

In August 2018 Kaiser Permanente and PGP launched a branded anti-stigma campaign across eight states and D.C., coordinating with and supporting 55 state- and community-based organizations within these states. Given its success, the campaign has been funded for an additional year.

Evaluation

An ~8% point avg. change in stigma in 9 months, totaling ~7 million people.
A representative survey measuring multiple indicators of public stigma established the intervention's baseline. Changes in Knowledge, Attitudes, and Behaviors were examined in subsequent surveys, with the formal 9 months campaign evaluation results collected in June 2019. Campaign recall is measured at 49.4%.

Campaign
This is the first campaign to:
- locate individuals openly speaking about a highly stigmatized condition, and give those individuals a platform. People submit stories daily.
- support numerous state- and community-based organizations with training and their own, requested communication materials.
- use local level influencers at-scale as campaign channels.

Media Metrics
- 22 million+ impressions
- 90,000+ followers
- 800,000+ actions taken on social media

| Desire for social distance from people living with a mental health condition	
willingness to live with	53.4% -> 65.3%
live nearby	62.8% -> 71.4%
have relationship with	72.8% -> 79.6%
Beliefs	
anyone can be diagnosed	63.8% -> 68.3%
treatment is effective	73.1% -> 81.1%
recovery is probable	45.1% -> 52.0%
are not dangerous	44.7% -> 50.1%
can be responsible	62.9% -> 66.3%
Behaviors	
I know how to help	56.8% -> 68.1%
I have helped in person	46.9% -> 55.8%
"" by phone	46.9% -> 55.8%

State-Based Opioid Stigma Campaign

Given…

- The volume of current conversation about personal experience,
- The number of local influencers,
- The number of existing community- and state-based organizations,
- PGP's previous experience with anti-stigma campaigns…

PGP recommends…

- An initial 27-month effort to reduce public stigma
  - Followed by 12-month campaign periods
- A goal of an **8 percent average change** in stigma-related measures, per year. (see slide 17 in appendix for sample measures)
  - Example: In North Dakota this amounts to approximately 61,000 North Dakotans changing the way they think and act, every year
    - A **cost of approx. $10 per person**, per year, to eliminate stigma

and the state of **North Dakota** eliminating opioid stigma
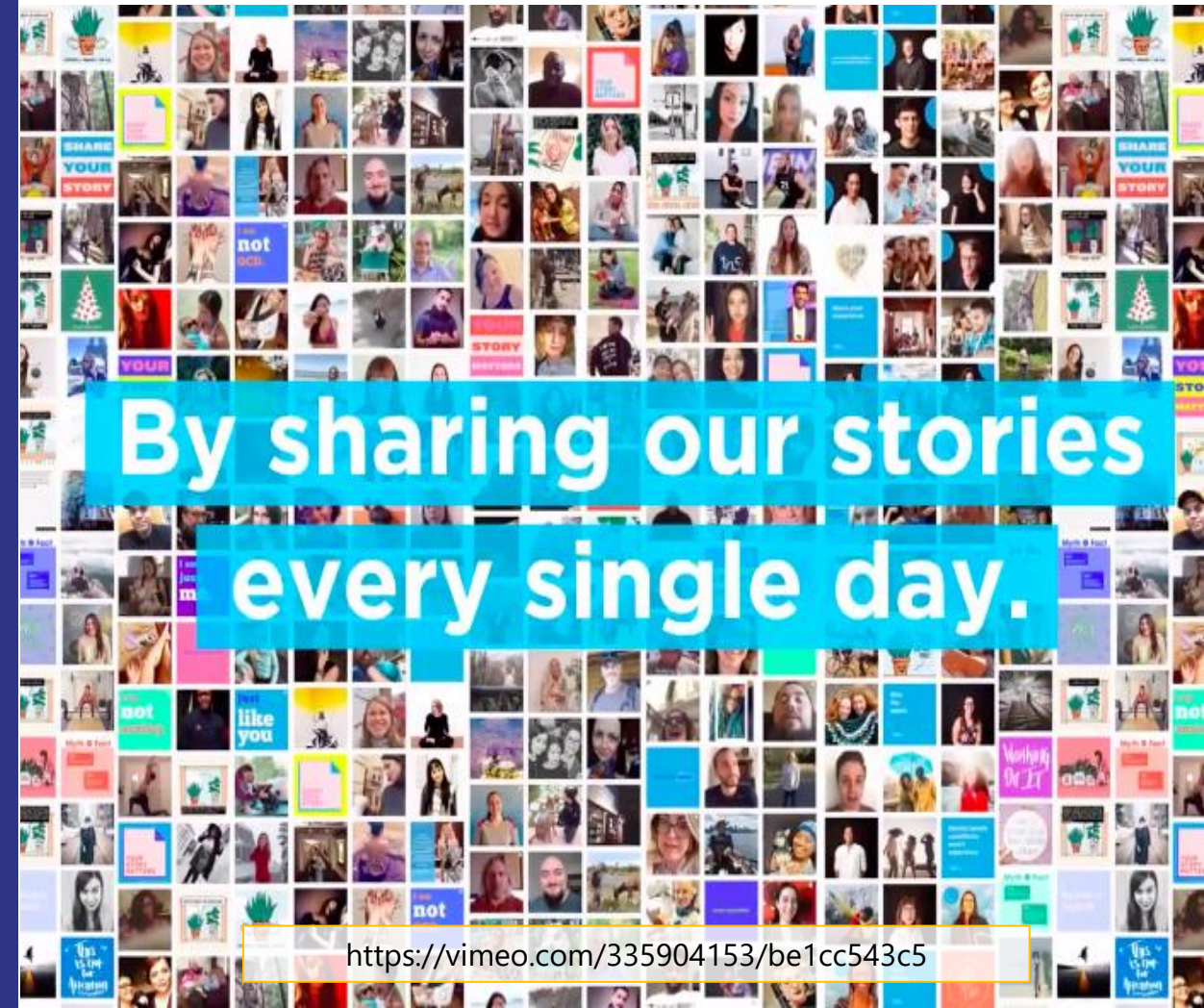
https://vimeo.com/335904153/be1cc543c5

Timeline

Stakeholders

Evaluation

Public

Formative Research
- Literature Review
- Subject Matter Expert Interviews
- Market research on audience segments (social norms, affinities)
- Baseline Surveys administered

Stakeholder Outreach
- Identify relevant stakeholders
- Prioritize stakeholders into tiers
- Begin outreach, starting with highest priority partners

Campaign Launch

Campaign Execution
- Media Metrics Reports presented monthly
- Stakeholder technical assistance provided monthly
- Ongoing media buys, influencer outreach, individuals recruited
- Media metrics inform changes to strategy week-to-week, monthly

Month 2

Month 3

Month 6

Campaign Strategy
- Priority audiences defined
- Media buys determined
- Campaign website/accounts created
- Content strategy finalized (messages)
- Influencer identification begins
- Outreach to individuals begins

Evaluation
- 6-month timepoint evaluation, with surveys administered and compared to Baseline results
- Evaluation report submitted to stakeholders

Timeline cont'd

Campaign's 15-month mark
- **100+** real people's stories shared by the campaign
- **Dozens** of influencers sharing messages
- **50** stakeholder organizations in partnership
- **360** individual media assets (video, images, etc.) disseminated, one per day, every day
- **50%** of a state's population reached per year
- **1** peer-reviewed scientific publication

Campaign's 27-month mark (Year 2)
- **200+** real people's stories shared by the campaign
- **Hundreds** of influencers sharing messages
- **100** stakeholder organizations in partnership
- **720** individual media assets (video, images, etc.) disseminated, one per day, every day
- **50%** of a state's population reached per year
- **2** peer-reviewed scientific publications

Month 15-27

Recommended Commitment: 2 years

PGP proposes a five-year goal, with two years (27-months) committed up-front, to build trust and awareness among the public, and create partnerships. In PGP's experience, a two-year initial scope instills confidence in community partners and makes the process of integrating into existing efforts easier.

PGP can be flexible depending on need, but prefers an ambitious goal of an 8% avg. change in stigma by month 15, continuing each year.

Budget Year One & Subsequent Years

Item	Description	Cost Year One (15 months)	Cost Each Year Afterward (12 month intervals)
Formative Research	• Literature Review • Subject Matter Expert Interviews • Market research on audience segments (social norms, affinities) • Baseline Surveys administered	$100,000	--
Campaign Strategy	• Priority audiences strategy • Media buy strategy • Campaign website/accounts created • Message strategy	$50,000	--
Community Org. Management	• Identification and prioritization • Outreach, relationship management • Training development • Monthly trainings	$175,000	$125,000
Influencer and Individuals Outreach	• Identification • Vetting • Outreach • Relationship management	$100,000	$100,000
Ongoing Campaign Activities	• Website and social media management • Media buys • Monthly reporting to stakeholders • Outreach for donated media and other opportunities	$200,000	$200,000
Evaluation	• 6-month timepoint surveys • Data collection and analyses • Report write-ups • Peer-review (with local university) • IRB protocols, review	$100,000	$100,000
Other expenses	• Travel • Technology • Rent/Utilities (local office, production studio space) • General project management	$75,000	$50,000
TOTAL	• Year One: 15 months • Year Two+: 12 months	**$800,000**	**$575,000**

Thank You

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Appendix

General knowledge and demographics
e.g. "Prescription opioids and heroin have the same chemicals and can produce a similar high."
e.g. "People who are addicted to opioids can get treatment no matter where they live."

Public stigma
e.g. "In the future, I would be willing to live with someone who is addicted to opioids."
e.g. "People who are addicted to opioids can fully recover."

Questions specific to environments, such as college campuses and workplaces
e.g. "Colleges/universities should expel people who are addicted to opioids."
e.g. "Most people who are addicted to opioids want to have paid employment."

Healthcare
e.g. "I would feel uncomfortable seeing my doctor if I found out he or she treated patients who are addicted to opioids."
e.g. "Any healthcare provider who prescribes opioids for a patient should also have training on how to treat opioid addiction."

Policy
e.g. "Landlords should be allowed to deny housing to a person addicted to opioids."
e.g. "Policies should be created that provide equal access to treatment for opioid addiction."

Every county in a state is represented by standardized audience segments created from market research (credit card data, surveys, etc.) Often, multiple segments are contained in one county, and one city.

Stutsman County, ND
Tapestry Segmentation

- Tapestry segments are standardized audience segments used by market researchers.
- Segments are created using multiple sources of data.
- 67 distinct audience segments cover the American population, and within these segments are additional means of segmentation, such as by common life experiences.

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Tapestry Segmentation Area Profile

Stutsman County

Prepared by Esri

Top Twenty Tapestry Segments

		2019 Households		2019 U.S. Households		
			Cumulative		Cumulative	
Rank	Tapestry Segment	Percent	Percent	Percent	Percent	Index
1	Prairie Living (6D)	24.9%	24.9%	1.1%	1.1%	2332
2	In Style (5B)	24.6%	49.5%	2.2%	3.3%	1,094
3	Old and Newcomers (8F)	14.9%	64.4%	2.3%	5.6%	648
4	Heartland Communities (6F)	13.9%	78.3%	2.3%	7.9%	609
5	College Towns (14B)	6.7%	85.0%	1.0%	8.9%	700
	Subtotal	**85.0%**		**8.9%**		
6	Retirement Communities (9E)	4.6%	89.6%	1.2%	10.1%	377
7	Rustbelt Traditions (5D)	4.2%	93.8%	2.2%	12.3%	192
8	Small Town Simplicity (12C)	3.3%	97.1%	1.8%	14.1%	180
9	Traditional Living (12B)	3.0%	100.1%	1.9%	16.0%	155
	Subtotal	**15.1%**		**7.1%**		
	Total	**100.0%**		**16.0%**		**624**

- This segment over-indexes within Stutsman County.
- There is a wealth of market research on each segment.
- Local data is added to this market research, taken from state and local public health data as well as local subject matter experts.
- Local data is always given priority.

LifeMode Group: Cozy Country Living

Prairie Living

Households: 1,323,200

Average Household Size: 2.51

Median Age: 44.4

Median Household Income: $54,300

WHO ARE WE?

Prairie Living is Tapestry Segmentation's most rural market, comprising about 1.2 percent of households, located mainly in the Midwest, with a predominance of self-employed farmers. These agricultural communities are not diverse, dominated by married-couple families that own single-family dwellings and many vehicles. Median household income is similar to the US, and labor force participation is slightly higher. Faith is important to this hardworking market. When they find time to relax, they favor outdoor activities.

OUR NEIGHBORHOOD

- About four-fifths of households are owner occupied.
- Dominant household type is married-couples with no children.
- Most are single-family homes (87%) built before 1980; a higher proportion were built before 1940 (Index 218).
- Higher percentage of vacant housing units is at 16.5% (Index 146).
- Most households own 2 or 3 vehicles; this is the highest ranked market for owning 4 or more vehicles.

SOCIOECONOMIC TRAITS

- More than half have completed some college education or hold a degree.
- At 2.9%, the unemployment rate is almost less than half the US rate.
- Labor force participation rate slightly higher at 65%.
- Wage and salary income for 72% of households plus self-employment income for 23% (Index 217).
- Faith and religion are important to these residents.
- Tend to buy things when they need them, rather than when they want them or to be trendy.
- Somewhat resistant to new technology.
- Creatures of habit when purchasing food items.

TAPESTRY SEGMENTATION
esri.com/tapestry

Note: The Index represents the ratio of the segment rate to the US rate multiplied by 100. Consumer preferences are estimated from data by GfK MRI.

PGP's Previous and On-Going Opioid Work

U.S. Centers for Disease Control and Prevention (CDC)
Currently providing technical assistance and convening, in order to build capacity of health communications staff and increase the reach of CDC's own opioid awareness campaign.

U.S. Substance Abuse and Mental Health Services Administration (SAMHSA)
Funded by SAMHSA and working with the National Academies of Sciences, PGP researched priority populations for prevention messaging, tested messages with these populations, and created media for a national prevention campaign, using real people not actors, located in counties across the U.S. that over-indexed on opioid overdoses.

U.S. Drug Enforcement Agency
Created the brand identity for DEA's community outreach program, linking local law enforcement to public school systems.

Aspen Institute
PGP monitors all references to opioids in public media, and reports on national-level trends to a range of public health authorities.

WPP
PGP is a founding member of NOAC, the National Opioid Action Coalition, aligning WPP's 250 corporations, as well as external partners such as the U.S. Chamber of Commerce and CDC, on a common agenda for opioid communication.

Facebook, Google, Twitter, Tumblr
PGP regularly conducts original research with technology companies on various aspects of the opioid crisis. This data is then shared with federal and state health authorities (e.g. PGP and Facebook discovered that rural populations only share local, personal, and uplifting information regarding opioids).